

CHECKLIST FOR HUD REVIEW OF DEMOLITION/DISPOSITION REQUESTS

DOCUMENTATION	APP PAGE #	SUBMITTED	MISSING	N/A
DESCRIPTION OF PROPERTY - 24 CFR 970.8				
Development name & number				
Total units, buildings in existing development. Including bedroom distribution. (Breakdown building number by Dwelling/Non-dwelling)				
Total acreage and area involved				
Development age from DOFA (get it from IBS)				
Site map				
Estimate of project debt (get it from OFA if PHA does not know)				
Appraisal [Dispo. only - 24 CFR 970.8(l)]				
Estimate and specific uses for proceeds of sale [Dispo. only - 24 CFR 970.8(m)] (Provide \$ amount of net proceeds)				
Other supporting documentation				
COMMENTS:				
DESCRIPTION OF PROPOSED ACTION - 24 CFR 970.8				
Total units and buildings to be demolished (Breakdown building number by Dwelling/Non-dwelling structures)				
Bedroom distribution of units to be demolished (Provide details of units types/sizes and expected date of activity in the tables at the end of this checklist)				
Timetable (Must include expected date(s) of demo/dispo action(s))				
Method of Disposition- Negotiated Sale (need justification)				
Method of Disposition- At Fair Market Value				
Method of Disposition- Less than Fair Market Value (need justification)				
Estimated cost of the demolition				
Sources of funding for the proposed activities				

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Comments:				
JUSTIFICATION FOR ACTION - 24 CFR 970.6 (demo.) OR 970.7 (dispo.)				
Demolition € development is obsolete as to physical condition, location or other factors <u>AND</u> no reasonable modifications feasible				
Partial Demolition € ensure useful life of remaining part of development (density reduction)				
Disposition € developmental changes in the area adversely affecting residents and/or operations of the development; OR,				
Disposition € allow for acquisition, dev., or rehab. of other properties that will be more efficiently operated;(only applies if the PHA is getting at least the same number of units back) OR				
Disposition € other factors consistent with interests of the residents				
Disposition of non-dwelling facilities € property is in excess of needs <u>OR</u>				
Disposition of non-dwelling facilities € dispo is incidental to, or does not interfere with continued operation of development				
Comments:				
RELOCATION PLAN - 24 CFR 970.5				
If units are already vacant, explain why, describe method of relocation and where to				
Assurance of decent, safe & sanitary condition for relocation housing				
Number of individual residents to be relocated (number of families/households is not sufficient)				
Counseling and advisory services to be provided				
Relocation resources				

DOCUMENTATION	APP PAGE #	SUBMITTED	MISSING	N/A
Estimate of relocation costs, including moving expenses & counseling and advisory services				
Minimum moving notice provided by HA				
Comments:				
RESIDENT CONSULTATION - 24 CFR 970.4(a)				
Narrative description of consultation process [includes HA wide & affected development's resident organization(s)]				
Copies of residents' comments				
Copies of resident organizations' comments				
HA's evaluation of resident comments				
Comments:				
SECTION 412 - 24 CFR 970.13				
NON APPLICABILITY - where the entire affected development is totally vacant € Supporting documentation (If vacated for rehab, describe how residents were notified of the change in PHA plans)				
EXCEPTIONS € Identify exception € Supporting documentation				
ORGANIZATION EXISTS € Copy of letter to resident organization at affected development (organization has 30 days to respond) € Copy of response(s) to letter € ED or Board certification that organization failed to respond				
NO ORGANIZATION EXISTS € Narrative description of HA efforts to assist residents in forming organization (Residents have 45 days to organize) € ED or Board certification that residents elected not to organize				
Comments:				
RESOLUTION & CERTIFICATIONS & ASSURANCES - 24 CFR 970.5 & 970.11				
HA Board resolution approving submission of request				
Assurance that no demo. until residents are relocated				

DOCUMENTATION	APP PAGE #	SUBMITTED	MISSING	N/A
Certification of compliance with the Uniform Relocation Act 970.5(h)(1)				
Environmental Review completed for the proposed action, including SHPO clearance				
Comments:				
LEGAL COUNSEL OPINION - 24 CFR 970.8				
App. consistent with applicable fed., state and local law. Optional, at reviewer's discretion.				
Comments:				

Timetable for Demolition/Disposition			
Indicate the Number of Units per Size and Type Proposed for Demo/Dispo from the Application			
CALENDAR YEAR _____ Year ____ of YEAR ____		CALENDAR YEAR _____ Year ____ of YEAR ____	
Elderly	Family	Elderly	Family
-0 Bedroom	-0 Bedroom	-0 Bedroom	-0 Bedroom
-1 Bedroom	-1 Bedroom	-1 Bedroom	-1 Bedroom
-2 Bedroom	-2 Bedroom	-2 Bedroom	-2 Bedroom
	-3 Bedroom		-3 Bedroom
	-4+ Bedroom		-4+ Bedroom
CALENDAR YEAR _____ Year ____ of YEAR ____		CALENDAR YEAR _____ Year ____ of YEAR ____	
Elderly	Family	Elderly	Family
-0 Bedroom	-0 Bedroom	-0 Bedroom	-0 Bedroom
-1 Bedroom	-1 Bedroom	-1 Bedroom	-1 Bedroom
-2 Bedroom	-2 Bedroom	-2 Bedroom	-2 Bedroom
	-3 Bedroom		-3 Bedroom
	-4+ Bedroom		-4+ Bedroom

Replacement Housing Plan			
Enter the proposed number of replacement units from each funding source by Fiscal Year in the replacement plan. (Replacement Housing Plans are not required at this time. Do not ask the HA for a plan)			
Fiscal Year	Public Housing	Section - 8	Other

Definitions for the replacement housing plan table:

Public Housing- Public Housing Development, MROP, CIAP/CGP/ proceeds of sale, and HOPE VI. Identify type and number of units in the comments window.

Other- State and Local

m.diaz 4/14/95
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